



# Utah State Division of Substance Abuse and Mental Health

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## Substance Abuse Prevention FY2003 Fact Sheet

### The Risk and Protective Factor Framework

Most people can easily name at least a few of the risk factors for a heart attack (e.g., smoking, obesity, high blood pressure). Public health organizations have done a great job of educating the American public about the behaviors and conditions that increase the likelihood of a person experiencing a heart attack.

In this same vein, recent research has identified a number of characteristics of a young person's school, community and family environments, as well as individual characteristics of young people and their peer groups, that are known to predict an increased likelihood of substance abuse and other problem behaviors. These characteristics are known as **Risk Factors**. Research has also identified a number of **Protective Factors** that have been demonstrated to exert a positive influence or serve as buffers against the negative influences of the Risk Factors, thus reducing the likelihood that young people will engage in problem behaviors. Together, these factors define the **Risk and Protective Factor Framework** that provides the foundation for the planning, implementation and evaluation of Utah's substance abuse prevention efforts.

### Utah's SICA Project

In 2000, the federal Center for Substance Abuse Prevention (CSAP) awarded Utah funding for a State Incentive Cooperative Agreement (SICA) Project. The primary goals of Utah's SICA Project, which targets 12-17 year olds, are to: 1) Develop a comprehensive, statewide prevention strategy that uses the Risk and Protective Factor Framework to increase the capacity of communities to reduce substance use among youth and to sustain these efforts following the completion of the SICA Project; 2) Implement science-based prevention approaches that are supported by sound research and demonstrated outcomes; and 3) Demonstrate a reduction in research-based indicators and substance use that affect youth, parents, and communities in Utah.

### The State Incentive Enhancement Project

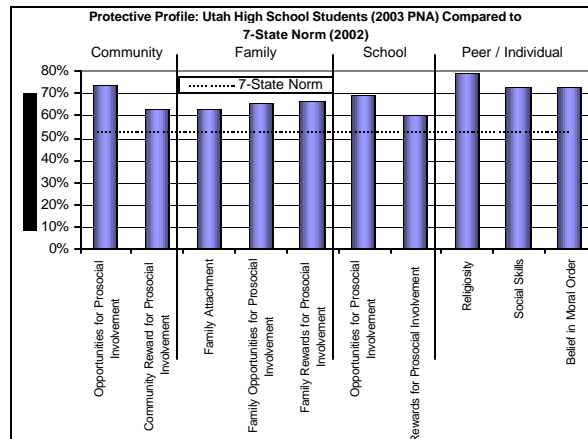
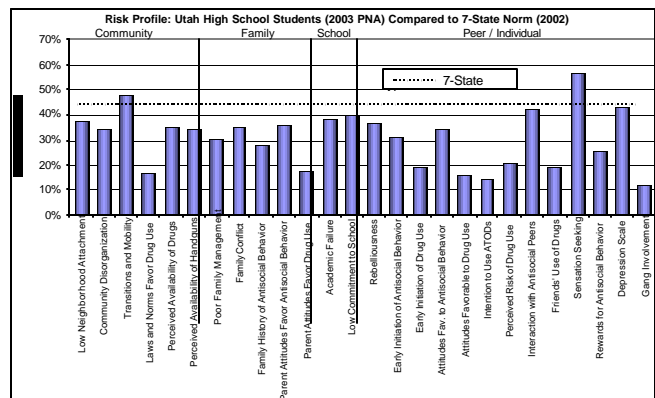
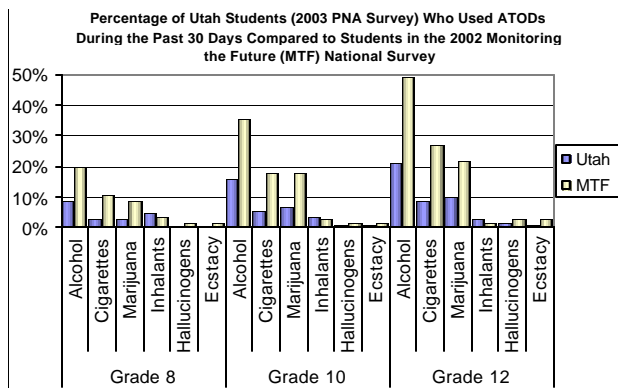
In 2003, CSAP awarded Utah a State Incentive Enhancement Grant (SIG-E). The purpose of the SIG-E Project is to expand the objectives and the successful model established in the SICA Project to address the prevention and early intervention needs of 18-25 year olds who are students at Utah's nine public colleges and universities.

### 2003 Prevention Needs Assessment Survey

During the spring of 2003, the Utah Division of Substance Abuse and Mental Health, in cooperation with the Utah Department of Health and the Utah State Office of Education, conducted the Student Health and Risk Prevention (SHARP) Survey Project. The SHARP Survey Project combined the administration of three critical student questionnaires: the Prevention Needs Assessment (PNA) Survey, the Youth Tobacco Survey (YTS), and the Youth Risk Behavior Survey (YRBS). The PNA portion of the combined survey specifically measured the need for substance abuse prevention services by assessing the rates of alcohol, tobacco and other drug use among students in grades 6 through 12 throughout the state, along with levels of risk and protection related to substance use/abuse. The figures on the following pages provide information regarding the rates of substance use, along with sample levels of both risk and protection. Utah figures are those obtained in the 2003 PNA Survey; national figures were obtained from the 2002 Monitoring the Future Survey and a norm developed through a 2002 7-state consortium study that included Colorado, Illinois, Kansas, Maine, Oregon, Utah and Washington. In general, **Utah students have a lower rate of ATOD use, lower levels of risk, and higher levels of protection than students nationally.**

### Outcomes

- For almost all substances, Utah students use at a much lower rate than students nationally (less than half the national use rates for *alcohol* and *marijuana*, and three times lower for *tobacco*).
- *Inhalants* are the only type of substance that Utah's 8<sup>th</sup>, 10<sup>th</sup>, and 12<sup>th</sup> grade students use more than students in the national sample.
- In terms of Risk Factors, the only areas where Utah's risk is above that of the 7-state norm are *Transitions and Mobility* and *Sensation Seeking*.
- In terms of Protective Factors, Utah's levels of protection are higher than the 7-state norm in all areas, particularly for *Religiosity* (over 20% higher) and *Opportunities for Prosocial Involvement* (over 15% higher).



## Dollars and Sense

- Prevention delays the onset of substance use. Research indicates that for each year adolescents delay the use of alcohol, the odds of their developing a lifelong dependency are decreased by 14%, and their odds of developing lifelong abuse are reduced by 8%.
- Similarly, for each year adolescents delay the initial use of drugs (other than alcohol), their odds of developing a lifelong dependency are reduced by 5%, and their odds of developing lifelong abuse are decreased by 4%.
- An ounce of prevention really is worth a pound of cure. It is much less costly to keep a child from abusing substances in the first place than it is to treat them once they have a problem.

## Emerging Trends

- Communities are conducting their prevention planning by utilizing the most current, reliable data to identify the key Risk Factors and Protective Factors for their areas. Prevention programs are then selected that will most effectively target these specific factors.
- Prevention providers in Utah are expanding their utilization of **science-based practices**. These are programs that have been repeatedly proven, through rigorous research, to lower risk and increase protection in young people and their communities, thus reducing the likelihood that substance abuse problems will develop.
- Program evaluation has become a key component of Utah's prevention efforts. In order to receive funding for programs, practitioners must be able to demonstrate effectiveness through positive program outcomes.
- Communities are making greater efforts to collaborate with all concerned agencies. Instead of schools, health agencies, law enforcement, and others each providing services independently, these agencies are striving to work together to coordinate services, maximize resources, and prevent duplication.

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